

U.S. EPA WASTE SHIPMENT RECORD FOR REGULATED ASBESTOS WASTE MATERIAL


P.Q. Hazardous Substance: Solid N.O.S. (asbestos): DRM-E NA-9188
This form is prepared in accordance with 40 C.F.R. 61.150(d) (NESHAPs)

001318

GENERATOR

1	Work site name: <u>Federal Center</u> Location: <u>4735 E. Marginal Way</u> Mailing address: <u>Same 98134</u>	Job #: <u>62200063-6</u> Box #: <u></u> County: <u>King</u>
2	Owner's name: <u>General Services Admin.</u> Operator's name: <u>Long Services Corporation</u> Mailing address: <u>8230 5th Avenue S.</u> <u>Seattle, Washington 98108</u> Contact person: <u></u>	Owner's phone: <u>768-9580</u> Contractor I.D. Number: <u>LONGSC*15103/1001</u> Operator's phone: <u>(206) 763-8433</u>
3	Waste disposal site: (WDS) DESTINATION Name: <u>Columbia Ridge Landfill</u> Mailing address: <u>18177 Cedar Springs Lane</u> <u>Arlington, Oregon 97812</u> WDS address/location: <u></u>	WDS phone: <u>(503) 454-2030</u>
4	Name and address of responsible agency (Local, District or EPA Office where demolition/renovation notification was sent): <u>PSAPCA 110 Union Street, Suite 500, Seattle, WA 98101</u>	
5	Description of waste materials	6. Containers Number Type
	Asbestos	
	<u>UAT</u>	<u>3 Bags</u>
8	Special handling instructions and additional information: <u>Per WISHA Regs</u>	
9	OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labelled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations. (Obtain signature in Item 10 before taking Gold sheet for receipt) <u>Larry Middaugh</u> Foreman <u>Larry Middaugh</u> 2-26-96 Printed/typed name Title Signature Date (MM/DD/YY)	

TRANSPORTER

10	Transporter 1 (Acknowledgment of receipt of materials) Name: <u>DYB TRUCKING</u> Address: <u>BOX 535 HOBBART WA</u> <u>RICK GREEN DRIVER</u> Printed/typed name Title Signature Date (MM/DD/YY)	Phone: <u>(206) 383-3860</u> <u>Rick Green</u> 3/7/96
11	Transporter 2 (Acknowledgment of receipt of materials) Name: <u></u> Address: <u></u> Printed/typed name Title Signature Date (MM/DD/YY)	USEPA SF  1337359 Date (MM/DD/YY)

WASTE DISPOSAL SITE

12	Discrepancy indication space: <u>SHIPPED TO CRUF</u>	Optional Disposal Location Index X Y Depth <u></u> <u></u> <u></u>
13	WASTE DISPOSAL SITE CERTIFICATION: I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true accurate and complete except as noted in Item 12. <u>RICK GREEN</u> NSTF <u>Rick Green</u> 3/7/96 Printed/typed name Title Signature Date (MM/DD/YY)	

U.S. EPA WASTE SHIPMENT RECORD FOR REGULATED ASBESTOS WASTE MATERIAL

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002042

GENERATOR

1	Work site name: <u>Federal Center South</u> Location: <u>4735 E. Marginal Way S.</u> Mailing address: _____	Job #: <u>62200063-6</u> Box #: _____ County: <u>King</u>
2	Owner's name: <u>General Services admin.</u> Operator's name: <u>Long Services Corporation</u> Mailing address: <u>8230 5th Avenue S.</u> <u>Seattle, Washington 98108</u> Contact person: _____	Owner's phone: <u>764-6803</u> Contractor I.D. Number: <u>LONGSC*15103/1001</u> Operator's phone: <u>(206) 763-8433</u>
3	Waste disposal site: (WDS) DESTINATION Name: <u>Columbia Ridge Landfill</u> Mailing address: <u>18177 Cedar Springs Lane</u> <u>Arlington, Oregon 97812</u> WDS address/location: _____	WDS phone: <u>(503) 454-2030</u>
4	Name and address of responsible agency (Local, District or EPA Office where demolition/renovation notification was sent): <u>PSAPCA 110 Union Street, Suite 500, Seattle, WA 98101</u>	
5	Description of waste materials	6. Containers Number Type Asbestos <u>UAT</u> <u>9</u> <u>Bags</u> 7. Total Quantity (cubic yards) <u>1</u>
8	Special handling instructions and additional information: <u>Per WISHA Regs</u>	
9	OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labelled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations. (Obtain signature in Item 10 before taking Gold sheet for receipt) <u>Larry Middaugh</u> <u>fourman</u> <u>Larry Middaugh</u> <u>3-7-96</u> Printed/typed name Title Signature Date (MM/DD/YY)	

TRANSPORTER

10	Transporter 1 (Acknowledgment of receipt of materials) Name: <u>DRB TRUCKING</u> Address: <u>Box 535 HEBART, WA</u> <u>Rick Green</u> <u>DRIVER</u> <u>Rick Green</u> <u>3/15/96</u> Printed/typed name Title Signature Date (MM/DD/YY)	Phone: <u>(206) 383-3860</u>
11	Transporter 2 (Acknowledgment of receipt of materials) Name: _____ Address: _____ Printed/typed name Title Signature Date (MM/DD/YY)	Phone: _____

WASTE DISPOSAL SITE

12	Discrepancy indication space: <u>SHIPPED TO CRLF</u>	Optional Disposal Location Index X Y Depth _____ _____ _____
13	WASTE DISPOSAL SITE CERTIFICATION: I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true accurate and complete except as noted in Item 12. <u>Rick Green</u> <u>NTSD</u> <u>Rick Green</u> <u>3/15/96</u> Printed/typed name Title Signature Date (MM/DD/YY)	

Upon transfer, Owner/operator retains GOLD, Transporter retains PINK, WDS retains YELLOW and sends completed WHITE copy to operator in Item 2.

U.S. EPA WASTE SHIPMENT RECORD FOR REGULATED ASBESTOS WASTE MATERIAL

P.Q. Hazardous Substance: Solid N.O.S. (asbestos): DRM-E NA-9188
This form is prepared in accordance with 40 C.F.R. 61.150(d) (NESHAPs)

005196

GENERATOR

1 Work site name: Federal Center South Job #: 2010098
Location: 4735 E. Marginal Way S Box #:
Mailing address: Seattle WA County: King
Owner's name: Owner's phone:
2 Operator's name: Long Services Contractor I.D. Number: LONGSC*15103/1001
Mailing address: 8230 5th Avenue South
Seattle, Washington 98108 Operator's phone: (206) 763-8433
Contact person:
3 Waste disposal site: (WDS) DESTINATION
Name: Columbia Ridge Landfill WDS phone: (541) 454-2030
Mailing address: 18177 Cedar Springs Lane
Arlington, Oregon 97812
WDS address/location:
4 Name and address of responsible agency (Local, District or EPA Office where demolition/renovation notification was sent):
PSCAA 110 Union Street, Suite 500, Seattle, WA 98101

5 Description of waste materials	6. Containers		7. Total Quantity (cubic yards)
	Number	Type	
Asbestos <u>ACM Pipe lagging</u>	<u>1</u>	<u>g-box</u>	<u>2y</u>

8 Special handling instructions and additional information:
Per WISHA Regs

9 OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations. (Obtain signature in Item 10 before taking Gold sheet for receipt)
Hai Tang foreman Hai Tang 3/11/01
Printed/typed name Title Signature Date (MM/DD/YY)

TRANSPORTER

10 Transporter 1 (Acknowledgment of receipt of materials)
Name: D&B TRUCKING Phone: (253) 383-3860
Address: BOX 535 HOBART, WA
Rick Green DRIVER Rick Green 3/15/01
Printed/typed name Title Signature Date (MM/DD/YY)

11 Transporter 2 (Acknowledgment of receipt of materials)
Name: Phone:
Address:
Printed/typed name Title Signature Date (MM/DD/YY)

WASTE DISPOSAL SITE

12 Discrepancy indication space: Optional Disposal Location Index
X Y Depth

13 WASTE DISPOSAL SITE CERTIFICATION: I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true accurate and complete except as noted in Item 12.
Brendt Green Brendt Green 03/19/01
Printed/typed name Title Signature Date (MM/DD/YY)

Upon transfer, Owner/operator retains GOLD, Transporter retains PINK, WDS retains YELLOW and sends completed WHITE copy to operator in Item 2.

U.S. EPA WASTE SHIPMENT RECORD FOR REGULATED ASBESTOS WASTE MATERIAL

P.Q. Hazardous Substance: Solid N.O.S. (asbestos): DRM-E NA-9188
This form is prepared in accordance with 40 C.F.R. 61.150(d) (NESHAPs)

005200

GENERATOR

1 Work site name: Frd Center south Job #: 2010 125
Location: SEATTLE Box #:
Mailing address: 4735 E MARGINAL SOUTH County: King
Owner's name: General Service Ad. Owner's phone: 7646802

2 Operator's name: Long Services Contractor I.D. Number: LONGSC*15103/1001
Mailing address: 8230 5th Avenue South
Seattle, Washington 98108 Operator's phone: (206) 763-8433
Contact person:

3 Waste disposal site: (WDS) DESTINATION
Name: Columbia Ridge Landfill WDS phone: (541) 454-2030
Mailing address: 18177 Cedar Springs Lane
Arlington, Oregon 97812
WDS address/location:

4 Name and address of responsible agency (Local, District or EPA Office where demolition/renovation notification was sent):
PSCAA 110 Union Street, Suite 500, Seattle, WA 98101

5 Description of waste materials	6. Containers		7. Total Quantity (cubic yards)
	Number	Type	
Asbestos <u>3 Yellow MAS</u> <u>PIPE TASSING</u>	<u>3</u>		<u>4.5</u>

8 Special handling instructions and additional information:

Per WISHA Regs

9 OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations. (Obtain signature in Item 10 before taking Gold sheet for receipt)

George Herzent Foreman [Signature] 318101
Printed/typed name Title Signature Date (MM/DD/YY)

TRANSPORTER

10 Transporter 1 (Acknowledgment of receipt of materials)
Name: DAB TRUCKING Phone: (253) 383-3860
Address: BOX 535 HOBART, WA
RICK GREEN DRIVER [Signature] 315101
Printed/typed name Title Signature Date (MM/DD/YY)

11 Transporter 2 (Acknowledgment of receipt of materials)
Name: Phone:
Address:
Printed/typed name Title Signature Date (MM/DD/YY)

WASTE DISPOSAL SITE

12 Discrepancy indication space: Optional Disposal Location Index
X Y Depth

13 WASTE DISPOSAL SITE CERTIFICATION: I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true accurate and complete except as noted in Item 12.

Brenda Green [Signature] 0319101
Printed/typed name Title Signature Date (MM/DD/YY)

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006988

GENERATOR

1 Work site name: Federal Center South Job #: 2020377
Location: 4735 E. Marginal Way S. Box #:
Mailing address: County:

2 Owner's name: General Service Admin Owner's phone: 206 764-6802
Operator's name: Long Services Contractor I.D. Number: LONGSC*15103/1001
Mailing address: 21414 - 68th Avenue South
Kent, Washington 98032-2416 Operator's phone: (253) 234-8050
Contact person:

3 Waste disposal site: (WDS) DESTINATION
Name: Columbia Ridge Landfill WDS phone: (541) 454-2030
Mailing address: 18177 Cedar Springs Lane
Arlington, Oregon 97812
WDS address/location:

4 Name and address of responsible agency (Local, District or EPA Office where demolition/renovation notification was sent):
PSCAA 110 Union Street, Suite 500, Seattle, WA 98101

5 Description of waste materials	6. Containers		7. Total Quantity (cubic yards)
	Number	Type	
Asbestos <u>Pipe Insulation</u>	<u>1</u>	<u>Bag</u>	<u>.5</u>

8 Special handling instructions and additional information:
Per WISHA Regs

9 OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations. (Obtain signature in Item 10 before taking Gold sheet for receipt)

Rodney Wallace Supervisor Rodney Wallace 9/10/02
Printed/typed name Title Signature Date (MM/DD/YY)

TRANSPORTER

10 Transporter 1 (Acknowledgment of receipt of materials)
Name: DB T. H. H. H. Phone: 253-383-3860
Address: Buck H. H. H. H. H. H. H. H. H. 9/10/02
Printed/typed name Title Signature Date (MM/DD/YY)

11 Transporter 2 (Acknowledgment of receipt of materials)
Name: Phone:
Address: 1/1
Printed/typed name Title Signature Date (MM/DD/YY)

WASTE DISPOSAL SITE

12 Discrepancy indication space:

Optional Disposal Location Index		
X	Y	Depth

13 WASTE DISPOSAL SITE CERTIFICATION: I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true accurate and complete except as noted in Item 12.

Scott H. H. H. Buck H. H. H. 9/10/02
Printed/typed name Title Signature Date (MM/DD/YY)

Upon transfer, Owner/operator retains GOLD. Transporter retains PINK, WDS retains YELLOW and sends completed WHITE copy to operator in Item 2.



PLEASE PRINT OR TYPE! If you have questions, contact your local DEQ Regional Office in Portland at (503) 229-5364, Salem at (503) 378-8240 ext. 272, Medford at (541) 776-6010 ext. 235, or Bend at (541) 388-6146 ext. 226, OR call (800) 452-4011 for the location of your local regional DEQ office.

WASTE GENERATOR: (Contractor, Facility, or Operator)

1. Asbestos removal site name and address: FED Center Sq. LG40208
4735 S. Marginal Way So. Seattle King WA
Street City/State County Zip
 Contact person: Wendal Bernades Phone: _____
2. Operator's name and address: Long Services Corporation Phone: 253-234-8050
21414 - 68th Avenue South Kent, WA King 98032
Street City/State County Zip
3. Waste disposal site: Northern Wasco County Landfill Phone: 541-296-4082
2550 Steel Road The Dalles, OR Wasco 97058
Street City/State County Zip
4. Describe asbestos materials: Pipe Insulation
5. Containers: Number: 80 Type: BAGS
6. Total quantity (cubic yards): 2x0

7. OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled, and are in all respects in proper condition for transport according to all government regulations. All movement of this asbestos-containing material is recorded on this Waste Shipment Record Form.

Name: Wendal Bernades Company: Long Services Corporation
 Signature: [Signature] Date: 6/28/04

TRANSPORTER(S):

8. Transporter #1: (Acknowledgment of receipt of materials)
 Agent: Robert Bloss Company: [Signature] DBT Inc.
 Address: P.O. Box 111111, WA 98101 Phone: 253-383-3860
 Signature: [Signature] Date: 6/28/04
9. Transporter #2: (Acknowledgment of receipt of materials)
 Agent: _____ Company: _____
 Address: _____ Phone: _____
 Signature: _____ Date: _____

DISPOSAL: (Certification of receipt of asbestos materials covered by this manifest, except as noted in item 11 below.)

10. Waste Disposal Site: WASCO COUNTY LANDFILL
 Name and Title: Nancy Mitchell, Site Manager Date: JUL 13 2004
 Signature: [Signature] Phone: 541-296-4082
11. DISCREPANCY SPACE: (Add attachments as needed)

ASN 4

ASBESTOS WASTE SHIPMENT REPORT FORM



PLEASE PRINT OR TYPE! If you have questions, contact your local DEQ Regional Office in Portland at (503) 229-5364, Salem at (503) 378-8240 ext. 272, Medford at (541) 776-6010 ext. 235, or Bend at (541) 388-6146 ext. 226, OR call (800) 452-4011 for the location of your local regional DEQ office. LOS0432

WASTE GENERATOR: (Contractor, Facility, or Operator)

1. Asbestos removal site name and address: 654
4735 E. Marginal Way S. Seattle WA King 98134
 Street City/State County Zip
 Contact person: Billy D. Galloway Phone: 206-764-6775
2. Operator's name and address: Long Services Corporation Phone: 253-234-8050
21414 - 68th Avenue South Kent, WA King 98032
 Street City/State County Zip
3. Waste disposal site: Northern Wasco County Landfill Phone: 541-296-4082
2550 Steel Road The Dalles, OR Wasco 97058
 Street City/State County Zip
4. Describe asbestos materials: 9 cm TSI
5. Containers: Number: 2 Type: 20895
6. Total quantity (cubic yards): 1 yard

7. OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled, and are in all respects in proper condition for transport according to all government regulations. All movement of this asbestos-containing material is recorded on this Waste Shipment Record Form.

Name: Tomas Montenegro Company: Long Services Corporation
 Signature: [Signature] Date: 12-6-05

TRANSPORTER(S):

8. Transporter #1: (Acknowledgment of receipt of materials)
 Agent: Scott Shaw Company: DHB
 Address: 1905 E Lincoln TRACY WA Phone: 253-383-3860
 Signature: [Signature] Date: 12-16-05
9. Transporter #2: (Acknowledgment of receipt of materials)
 Agent: _____ Company: _____
 Address: _____ Phone: _____
 Signature: _____ Date: _____

DISPOSAL: (Certification of receipt of asbestos materials covered by this manifest, except as noted in item 11 below.)

10. Waste Disposal Site: WASCO COUNTY LANDFILL
 Name and Title: Mary Mitchell, Site Manager Date: DEC 21 2005
 Signature: [Signature] Phone: 503-383-3860
11. DISCREPANCY SPACE: (Add attachments as needed)



PLEASE PRINT OR TYPE! If you have questions, contact your local DEQ Regional Office in Portland at (503) 229-5364, Salem at (503) 378-8240 ext. 272, Medford at (541) 776-6010 ext. 235, or Bend at (541) 388-6146 ext. 226, OR call (800) 452-4011 for the location of your local regional DEQ office. **LO60068**

WASTE GENERATOR: (Contractor, Facility, or Operator)

1. Asbestos removal site name and address: Federal Center South
4735 E Marginal way S. Seattle King 98134
 Street City/State County Zip
 Contact person: Bill Callaway Phone: _____
2. Operator's name and address: Long Services Corporation Phone: 253-234-8050
21414 - 68th Avenue South Kent, WA King 98032
 Street City/State County Zip
3. Waste disposal site: Northern Wasco County Landfill Phone: 541-296-4082
2550 Steel Road The Dalles, OR Wasco 97058
 Street City/State County Zip
4. Describe asbestos materials: TSI pipe insulation
5. Containers: Number: 7 Type: bags
6. Total quantity (cubic yards): 1

7. **OPERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled, and are in all respects in proper condition for transport according to all government regulations. All movement of this asbestos-containing material is recorded on this Waste Shipment Record Form.

Name: Hai Company: Long Services Corporation
 Signature: [Signature] Date: 3-9-06

TRANSPORTER(S):

8. Transporter #1: (Acknowledgment of receipt of materials)
 Agent: Scott Shaw Company: D & B TRUCKING
 Address: 1905 E. LINCOLN AVE, TACOMA, WA Phone: (253) 383-3860
 Signature: [Signature] Date: 3-27-06
9. Transporter #2: (Acknowledgment of receipt of materials)
 Agent: _____ Company: _____
 Address: _____ Phone: _____
 Signature: _____ Date: _____

DISPOSAL: (Certification of receipt of asbestos materials covered by this manifest, except as noted in item 11 below.)

10. Waste Disposal Site: WASCO COUNTY LANDFILL
 Name and Title: Nancy Mitchell Site Manager Date: MAR 20 2006
 Signature: [Signature] Phone: 541-296-4082
11. **DISCREPANCY SPACE:** (Add attachments as needed)



PLEASE PRINT OR TYPE! If you have questions, contact your local DEQ Regional Office in Portland at (503) 229-5364, Salem at (503) 378-8240 ext. 272, Medford at (541) 776-6010 ext. 235, or Bend at (541) 388-6146 ext. 226, OR call (800) 452-4011 for the location of your local regional DEQ office. LOGOIC 8

WASTE GENERATOR: (Contractor, Facility, or Operator)

1. Asbestos removal site name and address: FEDERAL CENTER SOUTH
4735 E. MARGINAL WAY SEATTLE, WA KING 98134
Street City/State County Zip
 Contact person: BILLY D. GALLOWAY Phone: 206-764-6775
2. Operator's name and address: Long Services Corporation Phone: 253-234-8050
21414 - 68th Avenue South Kent, WA King 98032
Street City/State County Zip
3. Waste disposal site: Northern Wasco County Landfill Phone: 541-296-4082
2550 Steel Road The Dalles, OR Wasco 97058
Street City/State County Zip
4. Describe asbestos materials: MAG PIPE INSUL.
5. Containers: Number: 5 YELLOW BAGS Type: DOUBLE GML BAGS
6. Total quantity (cubic yards): 5

7. **OPERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled, and are in all respects in proper condition for transport according to all government regulations. All movement of this asbestos-containing material is recorded on this Waste Shipment Record Form.

Name: MIKE GUDYKA Company: Long Services Corporation
 Signature: [Signature] Date: 6-9-06

TRANSPORTER(S):

8. Transporter #1: (Acknowledgment of receipt of materials)
 Agent: [Signature] Company: D & B TRUCKING
 Address: 1905 E. LINCOLN AVE. TACOMA, WA Phone: (253) 383-3860
 Signature: [Signature] Date: 6/20/06
9. Transporter #2: (Acknowledgment of receipt of materials)
 Agent: _____ Company: _____
 Address: _____ Phone: _____
 Signature: _____ Date: _____

DISPOSAL: (Certification of receipt of asbestos materials covered by this manifest, except as noted in item 11 below.)

10. Waste Disposal Site: WASCO COUNTY LANDFILL
 Name and Title: [Signature] Date: JUN 26 2006
 Signature: [Signature] Phone: 541-296-4082
11. **DISCREPANCY SPACE:** (Add attachments as needed)



PLEASE PRINT OR TYPE! If you have questions, contact your local DEQ Regional Office in Portland at (503) 229-5364, Salem at (503) 378-8240 ext. 272, Medford at (541) 776-6010 ext. 235, or Bend at (541) 388-6146 ext. 226, OR call (800) 452-4011 for the location of your local regional DEQ office. L070101

WASTE GENERATOR: (Contractor, Facility, or Operator)

1. Asbestos removal site name and address: FEDERAL CTR SOUTH
4735 E. MARGINAL WY. SO. SEATTLE WA. KING 98134
 Street City/State County Zip
 Contact person: Bill Galloway Phone: 206 761 6775
2. Operator's name and address: Long Services Corporation Phone: 253-234-8050
21414 - 68th Avenue South Kent, WA King 98032
 Street City/State County Zip
3. Waste disposal site: Northern Wasco County Landfill Phone: 541-296-4082
2550 Steel Road The Dalles, OR Wasco 97058
 Street City/State County Zip
4. Describe asbestos materials: PIPE INSULATION
5. Containers: Number: 6 Type: BAGS
6. Total quantity (cubic yards): 5

7. **OPERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled, and are in all respects in proper condition for transport according to all government regulations. All movement of this asbestos-containing material is recorded on this Waste Shipment Record Form.

Name: WENDELL BERNARDAS Company: Long Services Corporation
 Signature: [Signature] Date: 6-21-07

TRANSPORTER(S):

8. Transporter #1: (Acknowledgment of receipt of materials)
 Agent: Prosa Smith Company: D & B TRUCKING
 Address: 1905 E. LINCOLN AVE. TACOMA, WA Phone: (253) 383-3860
 Signature: [Signature] Date: 6-22-07
9. Transporter #2: (Acknowledgment of receipt of materials)
 Agent: _____ Company: _____
 Address: _____ Phone: _____
 Signature: _____ Date: _____

DISPOSAL: (Certification of receipt of asbestos materials covered by this manifest, except as noted in item 11 below.)

10. Waste Disposal Site: WASCO COUNTY LANDFILL JUN 25 2007
 Name and Title: Nancy Mitchell, Site Manager Date: _____
 Signature: [Signature] Phone: 541-296-4082
11. DISCREPANCY SPACE: (Add attachments as needed) _____



PLEASE PRINT OR TYPE! If you have questions, contact your local DEQ Regional Office in Portland at (503) 229-5364, Salem at (503) 378-8240 ext. 272, Medford at (541) 776-6010 ext. 235, or Bend at (541) 388-6146 ext. 226, OR call (800) 452-4011 for the location of your local regional DEQ office. ~~10043~~ 2070101

WASTE GENERATOR: (Contractor, Facility, or Operator)

1. Asbestos removal site name and address: FED. BUILDING SO.
4735 E MARGINAL WY. S. SEATTLE WA KING 98134
Street City/State County Zip
- Contact person: _____ Phone: _____
2. Operator's name and address: Long Services Corporation Phone: 253-234-8050
21414 - 68th Avenue South Kent, WA King 98032
Street City/State County Zip
3. Waste disposal site: Northern Wasco County Landfill Phone: 541-296-4082
2550 Steel Road The Dalles, OR Wasco 97058
Street City/State County Zip
4. Describe asbestos materials: DOOR INSULATION
5. Containers: Number: 1 DOOR Type: WRAPPED
6. Total quantity (cubic yards): .5

7. **OPERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled, and are in all respects in proper condition for transport according to all government regulations. All movement of this asbestos-containing material is recorded on this Waste Shipment Record Form.

Name: WENDELL BERNARDAS Company: Long Services Corporation
Signature: _____ Date: 4-4-07

TRANSPORTER(S):

8. Transporter #1: (Acknowledgment of receipt of materials)
Agent: Jeff Willett Company: D & B TRUCKING
Address: 1905 E. LINCOLN AVE. TACOMA, WA Phone: (253) 383-3860
Signature: Jeff Willett Date: 4-11-07
9. Transporter #2: (Acknowledgment of receipt of materials)
Agent: _____ Company: _____
Address: _____ Phone: _____
Signature: _____ Date: _____

DISPOSAL: (Certification of receipt of asbestos materials covered by this manifest, except as noted in item 11 below.)

10. Waste Disposal Site: WASCO COUNTY LANDFILL
Linda Miller
Name and Title: _____ Date: APR 12 2007
Signature: _____ Phone: 541-296-4082
11. **DISCREPANCY SPACE:** (Add attachments as needed)



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WASTE GENERATOR: (Contractor, Facility, or Operator)

1. Asbestos removal site name and address: FEDERAL CENTER SOUTH
4735 E. MAGNOLIA WY S. SEATTLE WA KING 98134
 Street City/State County Zip
 Contact person: Bill Galloway Phone: 206 764 6775
2. Operator's name and address: Long Services Corporation Phone: 253-234-8050
21414 - 68th Avenue South Kent, WA King 98032
 Street City/State County Zip
3. Waste disposal site: Northern Wasco County Landfill Phone: 541-296-4082
2550 Steel Road The Dalles, OR Wasco 97058
 Street City/State County Zip
4. Describe asbestos materials: PIPE INSULATION
5. Containers: Number: 1 Type: BAG
6. Total quantity (cubic yards): .5

7. OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled, and are in all respects in proper condition for transport according to all government regulations. All movement of this asbestos-containing material is recorded on this Waste Shipment Record Form.

Name: WENDELL BERNARDOS Company: Long Services Corporation
 Signature: [Signature] Date: 5-16-07

TRANSPORTER(S):

8. Transporter #1: (Acknowledgment of receipt of materials)
 Agent: [Signature] Company: D & B TRUCKING
 Address: 1905 E. LINCOLN AVE. TACOMA, WA Phone: (253) 383-3860
 Signature: [Signature] Date: 6/7/07
9. Transporter #2: (Acknowledgment of receipt of materials)
 Agent: _____ Company: _____
 Address: _____ Phone: _____
 Signature: _____ Date: _____

DISPOSAL: (Certification of receipt of asbestos materials covered by this manifest, except as noted in item 11 below.)

10. Waste Disposal Site: WASCO COUNTY LANDFILL
 Name and Title: [Signature] Date: JUN 11 2007
 Signature: [Signature] Phone: [Signature]
11. DISCREPANCY SPACE: (Add attachments as needed)